

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

ANDREW MCNEIL FOR CONGRESS

ADDRESS (number and street)

PO BOX 36

Check if different  
than previously  
reported. (ACC)

FREEDOM

IN

47431

2. FEC IDENTIFICATION NUMBER ▼

C

C00553131

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

IN

08

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Kristin Ann Woodruff

Signature of Treasurer

Kristin Ann Woodruff

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 28

Write or Type Committee Name

**ANDREW MCNEIL FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	3

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	13990.22	13990.22
(b) Total Contribution Refunds (from Line 20(d)) .....	1830.00	1830.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	12160.22	12160.22
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	5739.43	5739.43
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	5739.43	5739.43
8. Cash on Hand at Close of Reporting Period (from Line 27).....	6420.79	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 28

Write or Type Committee Name

**ANDREW MCNEIL FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	3

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:**

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

9200.00

9200.00

(ii) Unitemized.....

3465.00

3465.00

(iii) TOTAL of contributions from individuals ▶

12665.00

12665.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

1325.22

1325.22

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

13990.22

13990.22

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

13990.22

13990.22

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	5739.43	5739.43
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	1830.00	1830.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1830.00	1830.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	7569.43	7569.43

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	13990.22
25. SUBTOTAL (add Line 23 and Line 24).....	13990.22
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	7569.43
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6420.79

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 5 OF 28

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Chris A. Kempf**

Mailing Address 2105 Duffers Lane

City

Evansville

State

IN

Zip Code

47726

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Donut Bank

Occupation

President of Donut Bank/Partner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2013

Transaction ID : SA11AI.4207

Amount of Each Receipt this Period

500.00

Donation

Full Name (Last, First, Middle Initial)

**Bret McNeil**

Mailing Address 3939 E. Co. Rd. 500 South

City

Middleton

State

IN

Zip Code

47435

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Miller Consulting Inc.

Occupation

Contract Checker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2013

Transaction ID : SA11AI.4132

Amount of Each Receipt this Period

500.00

Donation

Full Name (Last, First, Middle Initial)

**Ethan Josiah McNeil**

Mailing Address 3828 S. U.S. HWY 231

City

Freedom

State

IN

Zip Code

47431

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Keith Construction

Occupation

Office Administrator

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2013

Transaction ID : SA11AI.4370

Amount of Each Receipt this Period

2600.00

In-kind - Web Development

**SUBTOTAL** of Receipts This Page (optional).....

3600.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ANDREW MCNEIL FOR CONGRESS

Full Name (Last, First, Middle Initial)

Isaac McNeil

Mailing Address 6503 Schell lane

City

Anderson

State

IN

Zip Code

46013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Progressive InsuranceOccupation  
Claims Manager

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2013

Transaction ID : SA11AI.4167

Amount of Each Receipt this Period

250.00

Donation

Full Name (Last, First, Middle Initial)

Joseph McNeil

Mailing Address 3111 Dunn Rd.

City

Freedom

State

IN

Zip Code

47431

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Freedom Business SolutionsOccupation  
Owner/Operator

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

540.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2013

Transaction ID : SA11AI.4200

Amount of Each Receipt this Period

500.00

Donation

Full Name (Last, First, Middle Initial)

Phyllis McNeil

Mailing Address 3081 Dunn Rd.

City

Freedom

State

IN

Zip Code

47431

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retiredOccupation  
retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		22		2013

Transaction ID : SA11AI.4253

Amount of Each Receipt this Period

200.00

Donation

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

950.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Randy McNeil**

Mailing Address 2755 N. Washington St.

City

Danville

State

IN

Zip Code

46122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Global Constructors

Occupation  
Project Manager

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
12 04 2013

Transaction ID : SA11AI.4254

Amount of Each Receipt this Period

500.00

Donation

Full Name (Last, First, Middle Initial)

**Randy McNeil**

Mailing Address 2755 N. Washington St.

City

Danville

State

IN

Zip Code

46122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Global Constructors

Occupation  
Project Manager

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M / D D / Y Y Y Y  
12 31 2013

Transaction ID : SA11AI.4256

Amount of Each Receipt this Period

100.00

Donation

Full Name (Last, First, Middle Initial)

**Ronald G. McNeil**

Mailing Address 3085 Dunn Rd.

City

Freedom

State

IN

Zip Code

47431

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
Small Business owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y  
12 16 2013

Transaction ID : SA11AI.4275

Amount of Each Receipt this Period

100.00

Donation

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

700.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ANDREW MCNEIL FOR CONGRESS

Full Name (Last, First, Middle Initial)

Ronald G. McNeil

A.

Mailing Address 3085 Dunn Rd.

City

Freedom

State

IN

Zip Code

47431

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

Small Business owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2013

Transaction ID : SA11AI.4277

Amount of Each Receipt this Period

100.00

Donation

Full Name (Last, First, Middle Initial)

Tammy McNeil

B.

Mailing Address 3939 E. Co. Rd. 500 South

City

Middleton

State

IN

Zip Code

47435

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
General Motors

Occupation

Designer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2013

Transaction ID : SA11AI.4134

Amount of Each Receipt this Period

500.00

Donation

Full Name (Last, First, Middle Initial)

Marty K. Persinger

C.

Mailing Address 3384 Beech Church Rd.

City

Coal City

State

IN

Zip Code

47868

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self employed

Occupation

Co-Owner of Thatcher Trucking

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2013

Transaction ID : SA11AI.4246

Amount of Each Receipt this Period

700.00

Donation

SUBTOTAL of Receipts This Page (optional).....

1300.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Lavonda Thatcher**

Mailing Address 15040 Vine Street

City

Coal City

State

IN

Zip Code

47427

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
10 13 2013

Transaction ID : SA11AI.4240

Amount of Each Receipt this Period

500.00

Donation

Full Name (Last, First, Middle Initial)

**Lavonda Thatcher**

Mailing Address 15040 Vine Street

City

Coal City

State

IN

Zip Code

47427

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

515.00

Date of Receipt

M M / D D / Y Y Y Y  
11 24 2013

Transaction ID : SA11AI.4243

Amount of Each Receipt this Period

15.00

Donation

Full Name (Last, First, Middle Initial)

**Lavonda Thatcher**

Mailing Address 15040 Vine Street

City

Coal City

State

IN

Zip Code

47427

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

515.00

Date of Receipt

M M / D D / Y Y Y Y  
12 11 2013

Transaction ID : SA11AI.4244

Amount of Each Receipt this Period

500.00

Donation

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1015.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 28

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Lavonda Thatcher**

Mailing Address 15040 Vine Street

City

State

Zip Code

Coal City

IN

47427

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

530.00

Date of Receipt

M M / D D / Y Y Y Y  
12 22 2013

Transaction ID : SA11AI.4245

Amount of Each Receipt this Period

15.00

Donation

Full Name (Last, First, Middle Initial)

**Trucking Thatcher**

Mailing Address 15000 Vine Street

City

State

Zip Code

Coal City

IN

47427

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Business

Occupation  
Trucking

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
10 13 2013

Transaction ID : SA11AI.4286

Amount of Each Receipt this Period

500.00

Donation

Full Name (Last, First, Middle Initial)

**Trucking Thatcher**

Mailing Address 15000 Vine Street

City

State

Zip Code

Coal City

IN

47427

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Business

Occupation  
Trucking

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

620.00

Date of Receipt

M M / D D / Y Y Y Y  
11 24 2013

Transaction ID : SA11AI.4289

Amount of Each Receipt this Period

120.00

Donation

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

635.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Trucking Thatcher**

Mailing Address 15000 Vine Street

City

Coal City

State

IN

Zip Code

47427

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BusinessOccupation  
Trucking

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

620.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2013

Transaction ID : SA11AI.4290

Amount of Each Receipt this Period

500.00

Donation

Full Name (Last, First, Middle Initial)

**Sally Vance**

Mailing Address 2581 Vance Rd.

City

Spencer

State

IN

Zip Code

47460

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retiredOccupation  
retired

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2013

Transaction ID : SA11AI.4278

Amount of Each Receipt this Period

500.00

Donation

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1000.00

9200.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 28

☐ 11a ☐ 11b ☐ 11c ☒ 11d ☐ 15  
12 13a 13b 14

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Andrew McNeil**

Mailing Address 3116 Dunn Rd.

City

Freedom

State

IN

Zip Code

47431

FEC ID number of contributing  
federal political committee.

**C** H4IN08199

Name of Employer

Ronoco Coffee

Occupation

Regional Sales Representative

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

130.00

Date of Receipt

**10** / **12** / **2013**

**Transaction ID : SA11D.4381**

Amount of Each Receipt this Period

130.00

In-kind - Fuel

Full Name (Last, First, Middle Initial)

**Andrew McNeil**

Mailing Address 3116 Dunn Rd.

City

Freedom

State

IN

Zip Code

47431

FEC ID number of contributing  
federal political committee.

**C** H4IN08199

Name of Employer

Ronoco Coffee

Occupation

Regional Sales Representative

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

258.36

Date of Receipt

**10** / **26** / **2013**

**Transaction ID : SA11D.4344**

Amount of Each Receipt this Period

128.36

In-kind -Fuel

Full Name (Last, First, Middle Initial)

**Andrew McNeil**

Mailing Address 3116 Dunn Rd.

City

Freedom

State

IN

Zip Code

47431

FEC ID number of contributing  
federal political committee.

**C** H4IN08199

Name of Employer

Ronoco Coffee

Occupation

Regional Sales Representative

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

368.54

Date of Receipt

**10** / **30** / **2013**

**Transaction ID : SA11D.4374**

Amount of Each Receipt this Period

110.18

In-kind - campaign cell phone

**SUBTOTAL** of Receipts This Page (optional).....

368.54

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Andrew McNeil**

Mailing Address 3116 Dunn Rd.

City

Freedom

State

IN

Zip Code

47431

FEC ID number of contributing  
federal political committee.

**C** H4IN08199

Name of Employer

Ronoco Coffee

Occupation

Regional Sales Representative

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

494.54

Date of Receipt

**11** / **09** / **2013**

**Transaction ID : SA11D.4346**

Amount of Each Receipt this Period

126.00

In-kind -Fuel

Full Name (Last, First, Middle Initial)

**Andrew McNeil**

Mailing Address 3116 Dunn Rd.

City

Freedom

State

IN

Zip Code

47431

FEC ID number of contributing  
federal political committee.

**C** H4IN08199

Name of Employer

Ronoco Coffee

Occupation

Regional Sales Representative

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

547.09

Date of Receipt

**11** / **14** / **2013**

**Transaction ID : SA11D.4348**

Amount of Each Receipt this Period

52.55

In-kind -Fuel

Full Name (Last, First, Middle Initial)

**Andrew McNeil**

Mailing Address 3116 Dunn Rd.

City

Freedom

State

IN

Zip Code

47431

FEC ID number of contributing  
federal political committee.

**C** H4IN08199

Name of Employer

Ronoco Coffee

Occupation

Regional Sales Representative

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

599.64

Date of Receipt

**11** / **19** / **2013**

**Transaction ID : SA11D.4350**

Amount of Each Receipt this Period

52.55

In-kind -Fuel

**SUBTOTAL** of Receipts This Page (optional).....

231.10

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 11d ☐ 15  
12 13a 13b 14

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Andrew McNeil**

**A.**

Mailing Address 3116 Dunn Rd.

City

Freedom

State

IN

Zip Code

47431

FEC ID number of contributing  
federal political committee.

**C** H4IN08199

Name of Employer

Ronoco Coffee

Occupation

Regional Sales Representative

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

645.41

Date of Receipt

M M / D D / Y Y Y Y  
11 / 29 / 2013

**Transaction ID : SA11D.4376**

Amount of Each Receipt this Period

45.77

In-kind - campaign cell phone

Full Name (Last, First, Middle Initial)

**Andrew McNeil**

**B.**

Mailing Address 3116 Dunn Rd.

City

Freedom

State

IN

Zip Code

47431

FEC ID number of contributing  
federal political committee.

**C** H4IN08199

Name of Employer

Ronoco Coffee

Occupation

Regional Sales Representative

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

679.41

Date of Receipt

M M / D D / Y Y Y Y  
12 / 02 / 2013

**Transaction ID : SA11D.4390**

Amount of Each Receipt this Period

34.00

In-kind - Fuel

Full Name (Last, First, Middle Initial)

**Andrew McNeil**

**C.**

Mailing Address 3116 Dunn Rd.

City

Freedom

State

IN

Zip Code

47431

FEC ID number of contributing  
federal political committee.

**C** H4IN08199

Name of Employer

Ronoco Coffee

Occupation

Regional Sales Representative

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

715.01

Date of Receipt

M M / D D / Y Y Y Y  
12 / 10 / 2013

**Transaction ID : SA11D.4354**

Amount of Each Receipt this Period

35.60

In-kind -Fuel

**SUBTOTAL** of Receipts This Page (optional).....

115.37

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 28

☐ 11a ☐ 11b ☐ 11c ☒ 11d ☐ 15  
12 13a 13b 14

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Andrew McNeil**

**A.**

Mailing Address 3116 Dunn Rd.

City

Freedom

State

IN

Zip Code

47431

FEC ID number of contributing  
federal political committee.

**C** H4IN08199

Name of Employer

Ronoco Coffee

Occupation

Regional Sales Representative

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

813.89

Date of Receipt

M M / D D / Y Y Y Y  
12 13 2013

**Transaction ID : SA11D.4356**

Amount of Each Receipt this Period

98.88

In-kind -Fuel

Full Name (Last, First, Middle Initial)

**Andrew McNeil**

**B.**

Mailing Address 3116 Dunn Rd.

City

Freedom

State

IN

Zip Code

47431

FEC ID number of contributing  
federal political committee.

**C** H4IN08199

Name of Employer

Ronoco Coffee

Occupation

Regional Sales Representative

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

947.80

Date of Receipt

M M / D D / Y Y Y Y  
12 14 2013

**Transaction ID : SA11D.4358**

Amount of Each Receipt this Period

133.91

In-kind -Fuel

Full Name (Last, First, Middle Initial)

**Andrew McNeil**

**C.**

Mailing Address 3116 Dunn Rd.

City

Freedom

State

IN

Zip Code

47431

FEC ID number of contributing  
federal political committee.

**C** H4IN08199

Name of Employer

Ronoco Coffee

Occupation

Regional Sales Representative

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1147.80

Date of Receipt

M M / D D / Y Y Y Y  
12 30 2013

**Transaction ID : SA11D.4205**

Amount of Each Receipt this Period

200.00

Donation

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

432.79

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 11d ☐ 15  
12 13a 13b 14

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Andrew McNeil**

**A.**

Mailing Address 3116 Dunn Rd.

City

Freedom

State

IN

Zip Code

47431

FEC ID number of contributing  
federal political committee.

**C** H4IN08199

Name of Employer

Ronoco Coffee

Occupation

Regional Sales Representative

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1193.57

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 30 2013

**Transaction ID : SA11D.4378**

Amount of Each Receipt this Period

45.77

In-kind - campaign cell phone

Full Name (Last, First, Middle Initial)

**Andrew McNeil**

**B.**

Mailing Address 3116 Dunn Rd.

City

Freedom

State

IN

Zip Code

47431

FEC ID number of contributing  
federal political committee.

**C** H4IN08199

Name of Employer

Ronoco Coffee

Occupation

Regional Sales Representative

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1325.22

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 31 2013

**Transaction ID : SA11D.4360**

Amount of Each Receipt this Period

131.65

In-kind -Fuel

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

177.42

1325.22

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 28

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		12		2013

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
In-kind - Fuel

Amount of Each Disbursement this Period

130.00
--------

Transaction ID : SB17.4382

Candidate Name

Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	--	--

State: IN District: 08

Full Name (Last, First, Middle Initial)

**B. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		26		2013

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
breakfast for volunteers

Amount of Each Disbursement this Period

19.77
-------

Transaction ID : SB17.4332

Candidate Name

Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	--	--

State: IN District: 08

Full Name (Last, First, Middle Initial)

**C. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		26		2013

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
Lunch for volunteers

Amount of Each Disbursement this Period

40.45
-------

Transaction ID : SB17.4333

Candidate Name

Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	--	--

State: IN District: 08

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

190.22

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 28

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		26		2013

City	State	Zip Code
Freedom	IN	47431

Amount of Each Disbursement this Period

128.36
--------

Purpose of Disbursement  
In-kind -FuelCategory/  
Type**Transaction ID : SB17.4345**

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IN District: 08

Full Name (Last, First, Middle Initial)

**B. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		27		2013

City	State	Zip Code
Freedom	IN	47431

Amount of Each Disbursement this Period

83.61
-------

Purpose of Disbursement  
Fuel

002

Category/  
Type**Transaction ID : SB17.4330**

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IN District: 08

Full Name (Last, First, Middle Initial)

**C. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		27		2013

City	State	Zip Code
Freedom	IN	47431

Amount of Each Disbursement this Period

119.60
--------

Purpose of Disbursement  
Overnight Stay

002

Category/  
Type**Transaction ID : SB17.4331**

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IN District: 08

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

331.57

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		28		2013

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
Veteran's Day Wreath purchase

012

Amount of Each Disbursement this Period

30.00
-------

Transaction ID : SB17.4329

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: IN District: 08

Full Name (Last, First, Middle Initial)

**B. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		30		2013

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
In-kind - campaign cell phoneCategory/  
Type

Amount of Each Disbursement this Period

110.18
--------

Transaction ID : SB17.4375

Candidate Name

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: IN District: 08

Full Name (Last, First, Middle Initial)

**C. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2013

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
Warrick Co. Dinner Auction donation reimbursement

012

Amount of Each Disbursement this Period

23.53
-------

Transaction ID : SB17.4326

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: IN District: 08

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

163.71

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 28

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2013

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
reimbursement for Warrick County Republican dinner

007

Category/  
Type

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IN District: 08

Amount of Each Disbursement this Period

60.00
-------

Transaction ID : SB17.4327

Full Name (Last, First, Middle Initial)

**B. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2013

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
Fuel

002

Category/  
Type

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IN District: 08

Amount of Each Disbursement this Period

65.21
-------

Transaction ID : SB17.4328

Full Name (Last, First, Middle Initial)

**C. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2013

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
In-kind -FuelCategory/  
Type

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IN District: 08

Amount of Each Disbursement this Period

126.00
--------

Transaction ID : SB17.4347

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

251.21

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 28

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		12		2013

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
Overnight stay

002

Amount of Each Disbursement this Period

272.56
--------

Transaction ID : SB17.4325

Candidate Name

Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IN District: 08

Full Name (Last, First, Middle Initial)

**B. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2013

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
Fuel

002

Amount of Each Disbursement this Period

60.00
-------

Transaction ID : SB17.4323

Candidate Name

Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IN District: 08

Full Name (Last, First, Middle Initial)

**C. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2013

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
Meal for Volunteers

007

Amount of Each Disbursement this Period

84.72
-------

Transaction ID : SB17.4324

Candidate Name

Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IN District: 08

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

272.56

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
In-kind -Fuel

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: IN District: 08

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2013

Amount of Each Disbursement this Period

52.55
-------

Transaction ID : SB17.4349

**B. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
In-kind -Fuel

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: IN District: 08

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		19		2013

Amount of Each Disbursement this Period

52.55
-------

Transaction ID : SB17.4351

**C. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
In-kind - campaign cell phone

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: IN District: 08

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		29		2013

Amount of Each Disbursement this Period

45.77
-------

Transaction ID : SB17.4377

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

150.87
--------

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
In-kind - Fuel

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: IN District: 08

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		02		2013

Amount of Each Disbursement this Period

34.00
-------

Transaction ID : SB17.4391

**B. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: IN District: 08

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2013

Amount of Each Disbursement this Period

9.20
------

Transaction ID : SB17.4336

**C. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
Office supplies

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: IN District: 08

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2013

Amount of Each Disbursement this Period

9.62
------

Transaction ID : SB17.4337

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

52.82

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2013

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
Campaign Lunch

007

Category/  
Type

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IN District: 08

Amount of Each Disbursement this Period

29.15
-------

Transaction ID : SB17.4338

Full Name (Last, First, Middle Initial)

**B. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		10		2013

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
In-kind -Fuel

002

Category/  
Type

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IN District: 08

Amount of Each Disbursement this Period

35.60
-------

Transaction ID : SB17.4355

Full Name (Last, First, Middle Initial)

**C. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		13		2013

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
In-kind -Fuel

002

Category/  
Type

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IN District: 08

Amount of Each Disbursement this Period

98.88
-------

Transaction ID : SB17.4357

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

163.63

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		14		2013

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
In-kind -Fuel

002

Amount of Each Disbursement this Period

311.65
--------

Transaction ID : SB17.4359

Candidate Name

Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IN District: 08

Full Name (Last, First, Middle Initial)

**B. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2013

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
In-kind - campaign cell phoneCategory/  
Type

Amount of Each Disbursement this Period

45.77
-------

Transaction ID : SB17.4379

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IN District: 08

Full Name (Last, First, Middle Initial)

**C. Andrew McNeil**

Mailing Address 3116 Dunn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2013

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
In-kind -FuelCategory/  
Type

Amount of Each Disbursement this Period

131.65
--------

Transaction ID : SB17.4361

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IN District: 08

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

311.33

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Ethan Josiah McNeil**

Mailing Address 3828 S. U.S. HWY 231

City	State	Zip Code
Freedom	IN	47431

Purpose of Disbursement  
In-kind - Web Development

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		01		2013

Amount of Each Disbursement this Period

2600.00
---------

Transaction ID : SB17.4372

**B. Nite Owl**

Mailing Address 621 W. Temperance St.

City	State	Zip Code
Ellettsville	IN	47429

Purpose of Disbursement  
T-shirt order

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2013

Amount of Each Disbursement this Period

615.25
--------

Transaction ID : SB17.4302

**C.**

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

--

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3215.25

5103.17

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 28

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Lavonda Thatcher**

Mailing Address 15040 Vine Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		02		2013

City	State	Zip Code
Coal City	IN	47427

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
questionable contribution

010

**Transaction ID : SB20A.4242**

Candidate Name

**ANDREW MCNEIL FOR CONGRESS**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: IN District: 08

Full Name (Last, First, Middle Initial)

**B. Trucking Thatcher**

Mailing Address 15000 Vine Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2013

City	State	Zip Code
Coal City	IN	47427

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
questionable contribution

010

**Transaction ID : SB20A.4288**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**c. Trucking Thatcher**

Mailing Address 15000 Vine Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2013

City	State	Zip Code
Coal City	IN	47427

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
questionable contribution

010

**Transaction ID : SB20A.4291**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 OF 28

☐ 17 ☐ 18 ☐ 19a ☐ 19b  
☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

**ANDREW MCNEIL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

## **A. Trucking Thatcher**

Mailing Address 15000 Vine Street

City Coal City State IN Zip Code 47427

Purpose of Disbursement  
questionable contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 31 / 2013

Amount of Each Disbursement this Period

120.00

Transaction ID : SB20A.4292

010

Category/  
Type

## **B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

Category/  
Type

## **C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

120.00

1620.00